

EXHIBIT A

United States Bankruptcy Court for the Western District of New York	Your Mail ID is 166211872
Name of Debtor: Rochester Drug Co-Operative, Inc. Case Number: 20-20230	For Court Use Only Claim Number: 0000021974 File Date: 07/30/2020 17:49:41

Proof of Claim (Official Form 410)

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. With the exception of 503(b)(9), do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

04/19

Part 1: Identify the Claim	
1. Who is the current creditor? Name of the current creditor (the person or entity to be paid for this claim): SMITH + NEPHEW, INC. Other names the creditor used with the debtor: Smith & Nephew, Inc.	
2. Has this claim been acquired from someone else? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom?	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	
Where should notices to the creditor be sent? Name SMITH + NEPHEW, INC. Address Attn: Jordan E. Reifler, Esq. Legal Department 7135 Goodlett Farms Parkway City Cordova State TN ZIP Code 38016 Country (if International): Phone: 901-399-6044 Email: carol.madison@smith-nephew.com	Where should payments to the creditor be sent? (if different) Name Address City State ZIP Code Country (if International): Phone: Email:
4. Does this claim amend one already filed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims register (if known) Filed on MM / DD / YYYY	5. Do you know if anyone else has filed a proof of claim for this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing?

Part 2: Give Information About the Claim as of the Date the Case Was Filed**6. Do you have any number you use to identify the debtor?**☐ No☒ Yes.

Last 4 digits of the debtor's account or any number you use to identify the debtor:

6699

7. How much is the claim?

\$ 63,182.92

Does this amount include interest or other charges?☒ No☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).**8. What is the basis of the claim?**

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.

Goods Sold/Services (Trade Claim)

9. Is all or part of the claim secured?☒ No☐ Yes. The claim is secured by a lien on property.**Nature of property:**☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (official Form 410-A) with this *Proof of Claim*.☐ Motor vehicle☐ Other. Describe: _____**Basis for perfection:**

Attach redacted copies of documents, if any, that show evidence of perfection of security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ _____**Amount of the claim that is secured:** \$ _____**Amount of the claim that is unsecured:** \$ _____

(The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____**Annual Interest Rate** (when case was filed) _____%☐ Fixed ☐ Variable**10. Is this claim based on a lease?**☒ No☐ Yes. Amount necessary to cure any default as of the date of petition.

\$ _____

11. Is this claim subject to a right of setoff?☒ No☐ Yes. Identify the property: _____**12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**☒ No☐ Yes. Check one:☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).☐ Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).☐ Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).☐ Other. Specify subsection of 11 U.S.C. § 507 (a) (_____) that applies.

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

13. Does this claim qualify as an Administrative Expense under 11 U.S.C. § 503(b)(9)?☒ No☐ Yes. Amount that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☐ I am the creditor.
- ☒ I am the creditor's attorney or authorized agent.
- ☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- ☐ I am a guarantor, surety, endorser, or other co-debtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Jordan E. Reifler, Esq./cm 07/30/2020 17:49:41
Signature Date

Provide the name and contact information of the person completing and signing this claim:

Name Jordan E. Reifler, Esq.

Address Smith & Nephew, Inc.
Legal Department
7135 Goodlett Farms Parkway

City Cordova

State TN Zip 38016

Country (in international) USA

Phone 901-399-6044

Email carol.madison@smith-nephew.com

Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 116 LEHIGH DRIVE FAIRFIELD NJ 07004		

INVOICE		
Invoice Number 921144854	Invoice Date 06/08/2018	Page 1 of 1
Order Number 1522878	Customer Number 186699	PO Number 5281569
Order Date 06/07/2018	Ship Via FedEx Priority 10:30	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 40478370		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		76,127.40

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-010-30	Santyl Ointment 30 G	132	EA	225.75	29,799.00
		Collagenase Santyl Ointment, 250 units/g, 30g tube, 12 tubes per case				
		AWB Product # PLEASE SCAN to TRACELINK				
		Batch: 161046				
000020	50484-010-90	Santyl Ointment 90 G	72	EA	643.45	46,328.40
		Collagenase Santyl Ointment, 250 units/g, 90g tube, 12 tubes per case				
		AWB Product # PLEASE SCAN to TRACELINK				
		Batch: 161423-R				

Items total 76,127.40

Total Taxes 0.00

Many of Smith & Nephew's products are not listed on a government purchasing agreement such as a Federal Supply Schedule or Distribution and Pricing Agreement. Unless Smith & Nephew otherwise agrees in writing, products not listed on a government purchasing agreement are offered for sale under Smith & Nephew's commercial terms at www.sntandc.com. Smith & Nephew does not make any representations or certifications that any product not listed on a Federal Supply Schedule or other government purchasing agreement is a "domestic end product" under the Buy American Act or a "designated country end product" or "U.S.-made end product" under the Trade Agreements Act. The prices reflected on this invoice incorporate applicable discounts to Smith & Nephew's list prices for the named products. Consistent with Smith & Nephew's understanding of requirements applicable to purchases of discounted products under 42 U.S.C. § 1320a-7b(b)(3)(A) and/or 42 C.F.R. § 1001.952(h), listing of these invoice prices constitutes Smith & Nephew's notice to you of the amount and value of all discounts given on these products. Prices may be subject to further discounts and rebates (if any) per your agreement with Smith & Nephew. The products listed on this invoice may be subject to Smith & Nephew's warranties, as further detailed in Smith & Nephew's Terms and Conditions (available at www.sntandc.com) or in your agreement with Smith & Nephew, as applicable. You must fully and accurately report any reduced price received as a discount, rebate, or warranty in applicable cost reports and agree to provide certain related information to state and federal agencies upon request as required by law or regulation. Any invoice prices less than Smith & Nephew's list prices are "discounts" within the meaning of any safe harbors or other applicable protections regarding discounted product pricing (including but not limited to the statute and regulation cited above), whether or not this invoice includes language indicating that a price is "discounted." As such, by remitting payment for this purchase, you agree to satisfy all disclosure requirements imposed on purchasers under applicable laws or regulations, including the requirement to accurately report, or make available upon request by an appropriate authority, the net costs actually paid by you for discounted products.

For a complete list of Terms and Conditions, please refer to our website www.sntandc.com

Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 76,127.40 Discount amount if paid within discount payment term 1,522.55
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S&N will never ask you to change bank account details at short notice. If you are requested to change account details, please call your S&N Collections or Customer Services contact to verify the request.

Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 50 JET VIEW DRIVE ROCHESTER NY 14624		

INVOICE		
Invoice Number 921857466	Invoice Date 03/04/2019	Page 1 of 1
Order Number 200897619	Customer Number 186699	PO Number 5882348
Order Date 03/04/2019	Ship Via fedEx Ground	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 43615111		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		5,688.00

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-010-30	Santyl Ointment 30 G	24	EA	237.00	5,688.00
		Collagenase Santyl Ointment, 250 units/g, 30g tube, 12 tubes per case				
		AWB Product # PLEASE SCAN to TRACELINK				
		Batch: 8H22600630				
Items total						5,688.00

Total Taxes 0.00

Many of Smith & Nephew's products are not listed on a government purchasing agreement such as a Federal Supply Schedule or Distribution and Pricing Agreement. Unless Smith & Nephew otherwise agrees in writing, products not listed on a government purchasing agreement are offered for sale under Smith & Nephew's commercial terms at www.sntandc.com. Smith & Nephew does not make any representations or certifications that any product not listed on a Federal Supply Schedule or other government purchasing agreement is a "domestic end product" under the Buy American Act or a "designated country end product" or "U.S.-made end product" under the Trade Agreements Act. The prices reflected on this invoice incorporate applicable discounts to Smith & Nephew's list prices for the named products. Consistent with Smith & Nephew's understanding of requirements applicable to purchases of discounted products under 42 U.S.C. § 1320a-7b(b)(3)(A) and/or 42 C.F.R. § 1001.952(h), listing of these invoice prices constitutes Smith & Nephew's notice to you of the amount and value of all discounts given on these products. Prices may be subject to further discounts and rebates (if any) per your agreement with Smith & Nephew. The products listed on this invoice may be subject to Smith & Nephew's warranties, as further detailed in Smith & Nephew's Terms and Conditions (available at www.sntandc.com) or in your agreement with Smith & Nephew, as applicable. You must fully and accurately report any reduced price received as a discount, rebate, or warranty in applicable cost reports and agree to provide certain related information to state and federal agencies upon request as required by law or regulation. Any invoice prices less than Smith & Nephew's list prices are "discounts" within the meaning of any safe harbors or other applicable protections regarding discounted product pricing (including but not limited to the statute and regulation cited above), whether or not this invoice includes language indicating that a price is "discounted." As such, by remitting payment for this purchase, you agree to satisfy all disclosure requirements imposed on purchasers under applicable laws or regulations, including the requirement to accurately report, or make available upon request by an appropriate authority, the net costs actually paid by you for discounted products.

For a complete list of Terms and Conditions, please refer to our website www.sntandc.com

Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 5,688.00
		Discount amount if paid within discount payment term 113.76

S&N will never ask you to change bank account details at short notice. If you are requested to change account details, please call your S&N Collections or Customer Services contact to verify the request.

Case 2:20-20230-PRW, Doc 1490-1, Filed 02/03/22, Entered 02/03/22 22:30:12, Description: Exhibit A, Page 6 of 14

Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 116 LEHIGH DRIVE FAIRFIELD NJ 07004		

INVOICE		
Invoice Number 923863239	Invoice Date 01/15/2020	Page 1 of 1
Order Number 203753613	Customer Number 186699	PO Number 6493401
Order Date 01/15/2020	Ship Via FX Std O'Nite 3:30	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 32412437		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		98.40

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-044-09	PROSHIELD PLUS SKIN PROT, 4 Batch: PGBB	12	EA	8.20	98.40
Items total						98.40
Total Taxes						0.00

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For a complete list of Terms and Conditions, please refer to our website www.sntandc.com

Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 98.40
		Discount amount if paid within discount payment term 1.97

S&N will never ask you to change bank account details at short notice. If you are requested to change account details, please call your S&N Collections or Customer Services contact to verify the request.

Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 116 LEHIGH DRIVE FAIRFIELD NJ 07004		

INVOICE		
Invoice Number 923863240	Invoice Date 01/15/2020	Page 1 of 1
Order Number 203753613	Customer Number 186699	PO Number 6493401
Order Date 01/15/2020	Ship Via FX Std O'Nite 3:30	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 32412438		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		8,956.80

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-010-30	Santyl Ointment 30 G	36	EA	248.80	8,956.80
		Collagenase Santyl Ointment, 250 units/g, 30g tube, 12 tubes per case				
		AWB Product # PLEASE SCAN to TRACELINK				
		Batch: 181654				

Items total 8,956.80

Total Taxes 0.00

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For a complete list of Terms and Conditions, please refer to our website www.sntandc.com

Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 8,956.80 Discount amount if paid within discount payment term 179.14
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S&N will never ask you to change bank account details at short notice. If you are requested to change account details, please call your S&N Collections or Customer Services contact to verify the request.

Case 2:20-20230-PRW, Doc 1490-1, Filed 02/03/22, Entered 02/03/22 22:30:12, Description: Exhibit A, Page 8 of 14

Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 50 JET VIEW DRIVE ROCHESTER NY 14624		

INVOICE		
Invoice Number 923871606	Invoice Date 01/17/2020	Page 1 of 1
Order Number 203780163	Customer Number 186699	PO Number 6497262
Order Date 01/17/2020	Ship Via FedEx Priority 10:30	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 32449888		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		2,985.60

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-010-30	Santyl Ointment 30 G	12	EA	248.80	2,985.60
		Collagenase Santyl Ointment, 250 units/g, 30g tube, 12 tubes per case				
		AWB Product # PLEASE SCAN to TRACELINK				
		Batch: 181654				
Items total						2,985.60

Total Taxes 0.00

Many of Smith & Nephew's products are not listed on a government purchasing agreement such as a Federal Supply Schedule or Distribution and Pricing Agreement. Unless Smith & Nephew otherwise agrees in writing, products not listed on a government purchasing agreement are offered for sale under Smith & Nephew's commercial terms at www.sntandc.com. Smith & Nephew does not make any representations or certifications that any product not listed on a Federal Supply Schedule or other government purchasing agreement is a "domestic end product" under the Buy American Act or a "designated country end product" or "U.S.-made end product" under the Trade Agreements Act. The prices reflected on this invoice incorporate applicable discounts to Smith & Nephew's list prices for the named products. Consistent with Smith & Nephew's understanding of requirements applicable to purchases of discounted products under 42 U.S.C. § 1320a-7b(b)(3)(A) and/or 42 C.F.R. § 1001.952(h), listing of these invoice prices constitutes Smith & Nephew's notice to you of the amount and value of all discounts given on these products. Prices may be subject to further discounts and rebates (if any) per your agreement with Smith & Nephew. The products listed on this invoice may be subject to Smith & Nephew's warranties, as further detailed in Smith & Nephew's Terms and Conditions (available at www.sntandc.com) or in your agreement with Smith & Nephew, as applicable. You must fully and accurately report any reduced price received as a discount, rebate, or warranty in applicable cost reports and agree to provide certain related information to state and federal agencies upon request as required by law or regulation. Any invoice prices less than Smith & Nephew's list prices are "discounts" within the meaning of any safe harbors or other applicable protections regarding discounted product pricing (including but not limited to the statute and regulation cited above), whether or not this invoice includes language indicating that a price is "discounted." As such, by remitting payment for this purchase, you agree to satisfy all disclosure requirements imposed on purchasers under applicable laws or regulations, including the requirement to accurately report, or make available upon request by an appropriate authority, the net costs actually paid by you for discounted products.

For a complete list of Terms and Conditions, please refer to our website www.sntandc.com

Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 2,985.60 Discount amount if paid within discount payment term 59.71
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S&N will never ask you to change bank account details at short notice. If you are requested to change account details, please call your S&N Collections or Customer Services contact to verify the request.

Case 2:20-20230-PRW, Doc 1490-1, Filed 02/03/22, Entered 02/03/22 22:30:12, Description: Exhibit A, Page 9 of 14

Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE,INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE,INC 50 JET VIEW DRIVE ROCHESTER NY 14624		

INVOICE		
Invoice Number 923890276	Invoice Date 01/24/2020	Page 1 of 1
Order Number 203838215	Customer Number 186699	PO Number 6504941
Order Date 01/23/2020	Ship Via FedEx 2 Day	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 32531372		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		2,985.60

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-010-30	Santyl Ointment 30 G	12	EA	248.80	2,985.60
		Collagenase Santyl Ointment, 250 units/g, 30g tube, 12 tubes per case				
		AWB Product # PLEASE SCAN to TRACELINK				
		Batch: 181654				

Items total 2,985.60

Total Taxes 0.00

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Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 2,985.60
		Discount amount if paid within discount payment term 59.71

S&N will never ask you to change bank account details at short notice. If you are requested to change account details, please call your S&N Collections or Customer Services contact to verify the request.

Case 2:20-20230-PRW, Doc 1490-1, Filed 02/03/22, Entered 02/03/22 22:30:12, Description: Exhibit A, Page 10 of 14

Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 116 LEHIGH DRIVE FAIRFIELD NJ 07004		

INVOICE		
Invoice Number 923915454	Invoice Date 01/31/2020	Page 1 of 1
Order Number 203905486	Customer Number 186699	PO Number 6514925
Order Date 01/30/2020	Ship Via fedEx Ground	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 32628920		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		17,468.40

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-010-30	Santyl Ointment 30 G	36	EA	248.80	8,956.80
		Collagenase Santyl Ointment, 250 units/g, 30g tube, 12 tubes per case *AWB Product # PLEASE SCAN to TRACELINK* Batch: 182263				
000020	50484-010-90	Santyl Ointment 90 G	12	EA	709.30	8,511.60
		Collagenase Santyl Ointment, 250 units/g, 90g tube, 12 tubes per case *AWB Product # PLEASE SCAN to TRACELINK* Batch: 190126				

Items total 17,468.40

Total Taxes 0.00

Many of Smith & Nephew's products are not listed on a government purchasing agreement such as a Federal Supply Schedule or Distribution and Pricing Agreement. Unless Smith & Nephew otherwise agrees in writing, products not listed on a government purchasing agreement are offered for sale under Smith & Nephew's commercial terms at www.sntandc.com. Smith & Nephew does not make any representations or certifications that any product not listed on a Federal Supply Schedule or other government purchasing agreement is a "domestic end product" under the Buy American Act or a "designated country end product" or "U.S.-made end product" under the Trade Agreements Act. The prices reflected on this invoice incorporate applicable discounts to Smith & Nephew's list prices for the named products. Consistent with Smith & Nephew's understanding of requirements applicable to purchases of discounted products under 42 U.S.C. § 1320a-7b(b)(3)(A) and/or 42 C.F.R. § 1001.952(h), listing of these invoice prices constitutes Smith & Nephew's notice to you of the amount and value of all discounts given on these products. Prices may be subject to further discounts and rebates (if any) per your agreement with Smith & Nephew. The products listed on this invoice may be subject to Smith & Nephew's warranties, as further detailed in Smith & Nephew's Terms and Conditions (available at www.sntandc.com) or in your agreement with Smith & Nephew, as applicable. You must fully and accurately report any reduced price received as a discount, rebate, or warranty in applicable cost reports and agree to provide certain related information to state and federal agencies upon request as required by law or regulation. Any invoice prices less than Smith & Nephew's list prices are "discounts" within the meaning of any safe harbors or other applicable protections regarding discounted product pricing (including but not limited to the statute and regulation cited above), whether or not this invoice includes language indicating that a price is "discounted." As such, by remitting payment for this purchase, you agree to satisfy all disclosure requirements imposed on purchasers under applicable laws or regulations, including the requirement to accurately report, or make available upon request by an appropriate authority, the net costs actually paid by you for discounted products.

For a complete list of Terms and Conditions, please refer to our website www.sntandc.com

Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 17,468.40 Discount amount if paid within discount payment term 349.37
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Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 116 LEHIGH DRIVE FAIRFIELD NJ 07004		

INVOICE		
Invoice Number 923915455	Invoice Date 01/31/2020	Page 1 of 1
Order Number 203905486	Customer Number 186699	PO Number 6514925
Order Date 01/30/2020	Ship Via fedEx Ground	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 32629554		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		196.80

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-044-09	PROSHIELD PLUS SKIN PROT, 4 Batch: PGBB	24	EA	8.20	196.80
Items total						196.80
Total Taxes						0.00

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Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 196.80
		Discount amount if paid within discount payment term 3.94

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Smith & Nephew, Inc.
5600 Clearfork Main Street
Suite 600
Fort Worth, TX 76109
www.smith-nephew.com

Customer Service
T 1-800-876-1261
F 1-727-392-6914



Invoice Address		
ROCHESTER DRUG COOPERATIVE, INC PO BOX 24389 ROCHESTER NY 14624		

Delivery Address		
ROCHESTER DRUG COOPERATIVE, INC 50 JET VIEW DRIVE ROCHESTER NY 14624		

INVOICE		
Invoice Number 923936118	Invoice Date 02/06/2020	Page 1 of 1
Order Number 203973568	Customer Number 186699	PO Number 6525251
Order Date 02/06/2020	Ship Via FedEx Priority 10:30	Terms Of Delivery Smith&Nephew pays freight
Delivery Number 32727292		Currency USD
Payment Terms 2% 30 Days		
Total Amount Due		2,985.60

Line	Item Code	Product Description	Quantity	UOM	Package Price	Total
000010	50484-010-30	Santyl Ointment 30 G	12	EA	248.80	2,985.60
		Collagenase Santyl Ointment, 250 units/g, 30g tube, 12 tubes per case				
		AWB Product # PLEASE SCAN to TRACELINK				
		Batch: 182263				
Items total						2,985.60

Total Taxes 0.00

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For a complete list of Terms and Conditions, please refer to our website www.sntandc.com

Send Payment To: Smith & Nephew, Inc. PO Box 205651 Dallas, TX 75320-5651	For questions about your invoice call Customer Support Center: T 1-800-876-1261 F 1-727-392-6914	Total Amount Due 2,985.60 Discount amount if paid within discount payment term 59.71
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Case 2-20-20230-PRW, Doc 1490-1, Filed 02/03/22, Entered 02/03/22 22:30:12, Description: Exhibit A, Page 13 of 14



Smith & Nephew, Inc.
5600 Clearfork Main Street Suite 600
Fort Worth, Texas 76109

Sales Invoice **MIN/10010516**

Copy 1

**ROCHESTER DRUG COOPERATIVE, INC
D.B.A RDC
PO BOX 24389
ROCHESTER, NY 14624**

Ship to :
**ROCHESTER DRUG COOPERATIVE, IN
116 LEHIGH DRIVE
FAIRFIELD, NJ 07004**

Manual Sales : 300 36612 **Customer Order/Ref:** SLS-10354870 **Date:** 04-18-2017
Business Partner: C90000686 **Invoice:** MIN/10010516 **Customer Order:**
Carrier/LSP: **Terms of Delivery:** **Terms of Payment:** 30 2% Net 31

Line Item Description	Delivery Date	Quantity	Unit	Price	Discount	Amount In	USD
0 0010 Order 230024459 5048481015 REGRANEX GEL 15 g		24.0000	EA	920.5700		22,093.68	
				Subtotal	:	22,093.68	
Goods 22093.68							Total 22,093.68

Please state with your payment : MIN/10010516

For questions, contact : Christine Pellett
Telephone 978-749-1639 , Fax 901-566-7099
E-mail christine.pellett@smith-nephew.com

PLEASE REMIT PAYMENTS TO:
Smith & Nephew Inc.
PO Box 205651
Dallas, TX 75320-5651

FOR ACCOUNT INQUIRIES:
Phone: (978) 749-1639
Fax: (901) 566-7099